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THE NUFFIELD PROVINCIAL HOSPITALS TRUST

THE BERKS., BUCKS. AND OXON
REGIONAL HOSPITALS COUNCIL

REPORT

FOR THE PERIOD

JANUARY, 1943, to MARCH, 1946

Including the reports of the following bodies :

THE REGIONAL MEDICAL ADVISORY COMMITTEE
THE REGIONAL ADMINISTRATIVE ADVISORY COMMITTEE
THE BUCKS. & EAST BERKS. DIVISIONAL HOSPITALS COUNCIL
THE OXFORD & DISTRICT JOINT HOSPITALS BOARD
THE READING & DISTRICT JOINT HOSPITALS COUNCIL



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1943-46

THE BERKS., BUCKS. AND OXON REGIONAL HOSPITALS COUNCIL

LIST OF MEMBERS

Chairman :

Mr. A. Noel Mobbs, O.B.E.

Representing :

... .. Bucks. and East Berks. Divisional Hospitals Council.

Vice-Chairman :

Dr. A. Q. Wells

... .. Oxford and District Joint Hospitals Board.

Honorary Treasurer :

The Rt. Hon. Lord Bicester

... .. Oxford and District Joint Hospitals Board.

Representative Members :

Col. J. Norman Walker, C.I.E.

... .. Berkshire County Council and Royal Berkshire Hospital, Reading.

Sir Leonard West, O.B.E., LL.D., D.L., J.P.

Buckinghamshire County Council.

The Rt. Hon. The Earl of Macclesfield,
D.L., J.P.

Oxfordshire County Council.

Alderman Mrs. Harrison-Hall, J.P.

Oxford City Council.

Alderman Mrs. Jenkins

Reading County Borough Council.

Mrs. G. H. Stevenson

Radcliffe Infirmary.

Mr. H. A. Goddard

Ditto

Sir Owen Morshead, K.C.V.O.

King Edward VII Hospital, Windsor.

Captain L. M. Paterson

Royal Bucks. Hospital, Aylesbury.

(L) Mr. H. K. Scott, J.P.

Bucks. and East Berks. Divisional Hospitals Council.

(L) Mr. E. D. Sykes

Ditto

(V) Major H. Moreland, O.B.E., J.P.

Ditto

(V) Mr. E. F. Slade

Ditto

(L) Councillor Miss Spooner

Oxford and District Joint Hospitals Board.

(L) Dr. A. Q. Wells

Ditto

(V) Colonel H. E. du C. Norris, D.L., J.P.

Ditto

(V) Prof. E. G. T. Liddell, M.A.

Ditto

(L) Sir George Mowbray, Bt.

Reading and District Joint Hospitals Council.

(V) Mrs. V. Benyon

Ditto

(V) Mr. F. H. Aitken Walker, F.R.C.S.

Ditto

Mr. Douglas Veale, C.B.E.

University of Oxford.

Sir Ernest Rock Carling, F.R.C.S.

Nuffield Provincial Hospitals Trust.

(L) = local authority member ; (V) = voluntary hospital member.

Ex-officio Members :

Mr. A. Noel Mobbs, O.B.E.	...	...	Bucks. and East Berks. Divisional Hospitals Council.
The Rt. Hon. Lord Bicester	...	...	Oxford and District Joint Hospitals Board.
Mr. W. E. C. McIlroy, C.B.E., J.P.	...	...	Reading and District Joint Hospitals Council.
Professor G. E. Gask, C.M.G., D.S.O., F.R.C.S.	...	...	Regional Medical Advisory Committee.
Dr. A. H. T. Robb-Smith	...	...	Ditto
Mr. E. C. Bevers, F.R.C.S.	...	...	Regional Administrative Advisory Committee.
Mr. A. G. E. Sanctuary, M.A.	...	...	Ditto
The Rev. J. Crosbie-Oates	...	...	Contributory Schemes Advisory Committee.
Mr. G. Weston, F.H.A.	...	...	Ditto

Consultative Members :

Dr. E. C. H. Huddy	...	...	Medical Officer of Health, Berkshire.
Dr. G. W. H. Townsend	...	...	Medical Officer of Health, Buckinghamshire.
Dr. H. C. Jennings	...	...	Medical Officer of Health, Oxfordshire.
Dr. G. C. Williams, O.B.E.	...	...	Medical Officer of Health, Oxford.
Dr. S. L. Wright	...	...	Medical Officer of Health, Reading.
Mr. A. G. E. Sanctuary, M.A.	...	...	Chief Administrative Officer, Radcliffe Infirmary, Oxford.
Mr. H. E. Ryan, F.H.A.	...	...	Chief Administrative Officer, Royal Berks. Hospital, Reading.
Mr. G. Weston, F.H.A.	...	...	Chief Administrative Officer, King Edward VII Hospital, Windsor.
Mr. F. G. Dawes, F.C.I.S., F.H.A.	...	...	Chief Administrative Officer, Royal Bucks. Hospital, Aylesbury.
Dr. Eric Donaldson	...	...	Principal Regional Medical Officer, Ministry of Health, Region 6.

Co-opted Member :

Professor J. A. Ryle	Professor of Social Medicine, University of Oxford.
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Secretary :

Mr. George Watts, F.H.A., 16 King Edward Street, Oxford. (Tel. : 2712.)

THE BERKS., BUCKS. AND OXON REGIONAL HOSPITALS COUNCIL

REPORT FOR THE PERIOD 1st JANUARY, 1943, TO 31st MARCH, 1946.

Since its last report was published the Council has suffered many severe losses. The death in November, 1944, of its Chairman, Arthur Thomas Loyd, O.B.E., was followed in April, 1945, by that of its Honorary Secretary, William Hyde, C.B.E., D.L. Both Mr. Loyd and Alderman Hyde had held their respective offices since the creation of the Council in 1940, and, with Sir E. Farquhar Buzzard, Bt., K.C.V.O., D.M., the representative of the Nuffield Provincial Hospitals Trust, who passed away in December, 1945, had taken a leading part in its formation and subsequent development. All three were held in the highest regard and esteem by their colleagues, and it was a great blow to the Council to be deprived of their wise guidance and counsel within so short a period of time.

The Council also records with regret the death of Alderman C. J. V. Bellamy (Oxford City Council), Mrs. J. Holliday (Berkshire County Nursing Association), and Dr. H. J. Milligan (Medical Officer of Health, Reading), all of whom took an active interest in the Council's work.

Sir George Mowbray, Bt., was unanimously elected to the vacant office of Chairman, and the Nuffield Provincial Hospitals Trust has appointed Sir Ernest Rock Carling, F.R.C.S., as its representative on the Council:

The Purpose and Functions of the Council

It may not be inappropriate to begin this report by re-stating the purpose for which the Council was formed. That purpose, stated briefly, is to keep the hospital and ancillary medical services of the region under review, and to bring about a co-ordination of effort between the hospitals, statutory authorities and other bodies concerned in the provision of those services.

As in previous years, a great deal of the Council's work has arisen from or centred around the three Divisional Hospitals Councils and the Standing Advisory Committees, whose reports are now presented, together with that of the Council. Bearing in mind the abnormal difficulties of the period, they represent a sum total of work which is not unimpressive and which reflects considerable credit on all concerned. The work of the Medical Advisory Committee deserves special mention. In view of the exceptionally heavy demands which were made during the war and continue to be made on the time of members of the medical profession, it is remarkable that this Committee should have accomplished so much, and the Council extends its warmest thanks to Professor Gask and his colleagues for their valuable services.

Planning of Hospital Services

In spite of the obscurity which at that time surrounded the future organisation of the country's health services, the Council decided in 1943 that a useful purpose might be served if proposals for the post-war development of the hospital services in the region could be formulated. Clearly the questions of how or by whom the services should be provided or developed could not be discussed, but it was felt that if proposals could be drawn up in such a way as to be capable of fitting into the framework of a national scheme, much time might be saved at a later stage. Mainly the problem was one of assessing the available resources and estimating the probable future needs, and the Council accordingly recommended that the Divisional Councils should appoint Planning Committees to consider the needs of their respective areas.

As will be seen from the attached reports, the Divisional Councils acted on this recommendation, and already two of them have submitted their reports. When the third report is available all three will be considered in detail by the Planning Sub-Committee which the Regional Council has appointed, and a comprehensive report covering the hospital requirements of the whole region will be issued in due course.

The Regional Survey

The completion of the official survey of the region, which was carried out by surveyors appointed by the Nuffield Provincial Hospitals Trust in association with the Ministry of Health, provided the Planning Committees with a mass of information about the hospital services of the region as they were in 1938. The last complete normal pre-war year was chosen so as to link up with the surveys of the rest of the country, and the information was brought up to date by the

Committees themselves. The survey team included Professor G. E. Gask, Chairman of the Regional Medical Advisory Committee, and Mr. E. C. Bevers, Chairman of the Regional Administrative Advisory Committee, as well as Professor R. H. Parry, Medical Officer of Health for Bristol, and their report included valuable recommendations as to the future development of the services.

The Churchill Hospital, Headington, Oxford

Reference should perhaps be made at this stage to important developments in connection with the hospital services in Oxford. These are dealt with more fully in the report of the Oxford and District Joint Hospitals Board, but the Council takes this opportunity of congratulating the Board, not only on the result of its negotiations with the Ministry of Health in regard to the Churchill Hospital (with which at an earlier stage the Council was associated) but also on securing the agreement in principle of the local authorities and voluntary hospitals concerned and the University of Oxford to the setting up of a Provisional Joint Committee. This Committee is to draft proposals for the Minister of Health's consideration for meeting the hospital needs of Oxford and those of the Teaching Hospital Centre. It is gratifying to note that the experience gained in working together as members of the Regional and Divisional Hospitals Councils has had such important results.

Meanwhile the acquisition of the Churchill Hospital will do much to meet the urgent needs of the area for additional hospital accommodation.

The Canadian Red Cross Memorial Hospital, Taplow

There is a serious and urgent need for more general hospital and maternity beds in the Slough-Windsor-Maidenhead area, a need which obviously cannot be met by any considerable new building development for some years. It is with pleasure, therefore, that the Council learns that part of the Canadian Red Cross Memorial Hospital, Taplow, is, with the approval of the Canadian authorities, to be used to meet these urgent needs for the next few years. This addition to the available resources of the area is most welcome, and although, as is stated in its report, the Bucks. and East Berks. Divisional Hospitals Council has not been directly concerned in the negotiations, it owes much to its Chairman, Mr. Noel Mobbs, for his untiring efforts on behalf of local interests.

The Medical Services

The activities of the Medical Advisory Committee, to which reference has already been made, included the preparation of two most valuable and informative reports.

The first of these was concerned with the cancer services, and put forward proposals for a comprehensive Cancer Scheme for an enlarged region including the County and County Borough of Northampton. The work was undertaken at the request of the major local authorities concerned, following a conference convened by His Worship the Mayor of Oxford, and the Council gladly agreed to a proposal that the Northampton County and County Borough Councils and the Northampton General Hospital should be associated with the preparation of the report. Representatives of these bodies were added to the Council and to the Medical Advisory Committee for this particular purpose, and the Council warmly appreciates the co-operation and help it received from them. The report was circulated to the major local authorities and principal hospitals concerned, as well as to the Minister of Health and the National Radium Commission.

The Medical Advisory Committee was also engaged at this time on the preparation of a report on the maternity services in the Berks., Bucks. and Oxon region. The Committee had expressed its concern at the inadequacy of the maternity accommodation in the region (a deficiency which is not confined to this region) and the constituent local authorities were accordingly asked if they would be prepared to invite the Regional Council, through its Medical Advisory Committee, to formulate a scheme for a comprehensive regional maternity service. This they all agreed to do, and the Committee in due course presented its report, which has been submitted to all the major local authorities, welfare authorities and voluntary hospitals in the region, as well as to the Minister of Health and the Royal College of Obstetricians and Gynaecologists.

The report of the Medical Advisory Committee refers in detail to a number of other aspects of the medical services dealt with by that Committee. Noteworthy among these are the reports on the Ear, Nose and Throat, and Ophthalmic Services, the Interim Report of the Psychological Medicine Sub-Committee, and the Report of the Tuberculosis Sub-Committee, which was submitted through the Council to the Conference of Local Authorities referred to in the Council's last report.

The Bureau of Health and Sickness Records

Reference is also made in the report of the Medical Advisory Committee to the establishment in this region, by the Nuffield Provincial Hospitals Trust, of a Bureau of Health and Sickness Records. Hospitals in the Oxford Division of the region have willingly co-operated with the Bureau by providing facilities for the collection of patients' records, and a Sub-Committee of the Regional Council acts in an advisory capacity to the Bureau, which works under the direction of Professor J. A. Ryle, Director of the Institute of Social Medicine, and reports at intervals to the Council. The activities of the Bureau are at present confined to the Oxford area for financial and staffing reasons.

Hospital Treatment of School Children

The passing of the Education Act, 1944, placed new obligations on Local Education Authorities in regard to the provision of medical treatment, including hospital treatment, for children attending schools maintained by the authorities. These new obligations involved considerations of financial responsibility for children treated in voluntary hospitals, and by the request of the Area Committee of the British Hospitals Association, the Council convened a Joint Conference of Local Education Authorities and Voluntary Hospitals to consider the adoption of uniform procedure throughout the region. No final decisions were reached as negotiations were removed from the regional to the national level.

Ambulance Services

Realising the importance to the hospital service of an efficient ambulance service, easily accessible and available without regard to local boundaries, each of the Divisional Councils has given much time and thought to the possibility of effecting some form of co-ordinated ambulance service in its area. That each has found a somewhat different solution is not, perhaps, surprising, and in the present fluid state of the health services there is room for experiment. It is heartening, however, to find from the Divisional reports that the numerous ambulance-owning authorities have been willing to co-operate with the Divisional Councils in this important matter, and the Council hopes that the various schemes of co-ordination may point the way to a more closely unified service throughout the region.

Administrative Services

The Council fully appreciates the tremendous burden of work which the Chief Administrative Officers of the hospitals and their much-depleted staffs were called upon to bear during the war years, and considers that in the circumstances the Administrative Advisory Committee deserves to be commended for the various enquiries and investigations it carried out. This is especially true when it is remembered that the shortage of staff was itself a bar to putting many of the Committee's recommendations into practice. The Committee's activities covered a wide range of services, and are dealt with at greater length in its report.

Local Authority Subscriptions

It is a source of considerable gratification to the Council to record that the major local authorities in the region have continued to make generous use of their powers under Section 181.s.3 of the Public Health Act 1936, to subscribe towards the maintenance of the voluntary hospitals in the region. The amounts received by the Council and distributed through the Divisional Councils to the associated voluntary hospitals increased from £29,167 in 1943-44 to £30,500 in 1945-46, and have been a great help and encouragement to the benefiting hospitals.

It should be added that the powers under which these grants are made are permissive, not mandatory, and that the grants themselves are additional to the payments made by the same authorities to the voluntary hospitals for the maintenance of patients for whom the authorities have a statutory responsibility.

The Nuffield Provincial Hospitals Trust

The Council has continued to receive valuable financial help and encouragement from the Nuffield Provincial Hospitals Trust, for which warm thanks and appreciation are now expressed. The many and generous grants made by the Trustees have enabled the Council not only to give assistance towards the development of various services, but also to meet the expenditure of the various Planning Committees. Altogether, in the two years under review, grants totalling £4,500

were received from the Trustees, and a balance of £2,415 was brought forward from the previous year. Grants made and expenditure incurred totalled £6,319, leaving a balance of £596 to carry forward to the present year's accounts.

The principal grants made by the Council included £1,750 towards the establishment of Accident Services at Windsor and Aylesbury; £2,000 towards the Oxford Eye Hospital's interim development scheme; £500 for the Regional Pathological Scheme; £500 for the Emergency Bed and Ambulance Bureau at Windsor; and £200 for the Ambulance Bureau at Reading.

In addition to these grants for development purposes, the Council received £750 in 1944-45 and £850 in 1945-46 towards its administrative expenses, for which also the Council expresses its grateful thanks.

Conclusion

This report would be incomplete without a reference to the valuable co-operation and assistance the Council has continued to receive from its associated local authorities and voluntary hospitals. This co-operation and assistance has at all times been most readily given, and has been of great value to the Council in its efforts to promote that co-ordination of hospital services which it was the aim of the Nuffield Trust and its associated Regional and Divisional Councils to secure. Indeed it is safe to assume that but for the war, with its attendant difficulties, and the uncertainty which prevailed for so long as to the future organisation of the health services, progress in the desired direction would have been much more rapid.

In conclusion the Council desires to pay a well-deserved tribute to the officers of the constituent authorities and hospitals for their ready response to the many requests for facts and information about services. Such reports as those of the Planning Committees, and the Medical Advisory Committee's Reports on the Cancer and Maternity Services, necessarily involved extensive factual surveys, and made heavy demands on the officers, whose able assistance is much appreciated by the Council.

SUMMARISED ACCOUNTS, FOUR YEARS ENDED 31st MARCH, 1946

	1942-43	1943-44	1944-45	1945-46		1942-43	1943-44	1944-45	1945-46
	£	£	£	£		£	£	£	£
	Expenditure.				Administration Account	Income.			
Salaries and Wages ...	936	959	997	1,151	Nuffield Provincial Hospitals Trust ...	750	750	750	850
Printing, Stationery, Postages, Telephone	161	87	76	148	Divisional Councils Bed Levies ...	—	470	493	491
Rent, Light, Heat and Cleaning ...	130	157	115	89	Oxford and District Joint Hospitals Board ...	400	—	—	100
Travelling, Incidental and Office Expenses, Repairs, Decorations and Sundries ...	159	161	117	143	Interest on Deposit ...	40	25	34	20
	£1,386	£1,364	£1,305	£1,531		£1,190	£1,245	£1,277	£1,461
Balance in hand, carried forward ...	167	48	20	—	Balance in hand, brought forward ...	363	167	48	20
					Deficit carried forward				50
	£1,553	£1,412	£1,325	£1,531		£1,553	£1,412	£1,325	£1,531

	1942-43	1943-44	1944-45	1945-46
	£	£	£	£

Nuffield Provincial Hospitals Trust

Grants :

	1942-43	1943-44	1944-45	1945-46	Grants for Non-Administrative purposes	1942-43	1943-44	1944-45	1945-46
Royal Berks. Hospital	1,000	—	—	—		£	£	£	£
Oxford Nutrition Survey	350	—	—	—			2,000	500	2,000
Cancer Survey and Report ...	84	8	—	76					
Oxford Division ...	85	381	—	—					
Bucks. and East Berks. Division : Accident Services ...	—	1,750	—	—					
Ambulance Bureau	—	—	—	500					
Reading Division ...	—	60	—	—					
Ditto Ambulance Bureau	—	—	—	200					
Oxford Eye Hospital Interim Scheme ...	—	—	1,000	1,000					
Planning Committee's Expenditure, including Salaries of Staff	—	—	342	586					
Regional Pathological Scheme ...	—	—	—	500					
Balance in hand, carried forward ...	£1,519	£2,199	£1,342	£2,862	Balance in hand, brought forward ...	£2,600	£2,000	£500	£2,000
	2,462	2,263	1,421	559		1,381	2,462	2,263	1,421
	£3,981	£4,462	£2,763	£3,421		£3,981	£4,462	£2,763	£3,421

	1942-43	1943-44	1944-45	1945-46
	£	£	£	£

Local Authority Subscriptions under Public Health Act 1936, Section 181.s.3

Expenditure.

Allocations to Divisional Councils for distribution to Associated Hospitals:

Bucks. and East Berks. Oxford Reading

8,608 9,155 11,749 11,896
11,099 11,814 11,896
7,894 8,263 9,184 8,935

£27,601	£29,167	£30,050	£30,300
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Income.

Berks. County Council
Bucks. County Council
Oxon County Council
Oxford City Council
Reading County Council
Borough Council ...

9,600 10,000 10,300
7,576 8,167 8,500
3,075 3,100 3,250
3,850 3,900 4,000
3,500 4,000 4,000

£27,601	£29,167	£30,050	£30,300
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Summarised Balance Sheet as at 31st March, 1946

Liabilities.

Sundry Creditors
Other Grants, Income and Expenditure Account:
Balance as per account

£ s. d.
102 17 2
558 12 7

Assets.

Cash at Bank and in Hand
Sundry Debtors
Office Equipment and Furniture purchased during year
Administration Income and Expenditure Account:
Balance as per account

£ s. d.
472 16 10
72 7 0
66 12 10
49 13 1

£661	9	9
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£661	9	9
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Auditors' Certificate, appended to Accounts for the year ended 31st March, 1946.

(N.B. Similar Certificates were appended to the Accounts of the three previous years, which, however, were prepared on a Receipts and Payments basis.)

We have examined the foregoing Accounts, and the Statement of Affairs as at 1st April, 1945, together with the books of the Council and the vouchers relating thereto, and have verified the Cash Balances. We have obtained all the information and explanations we have required, and in our opinion the Balance Sheet is properly drawn up so as to exhibit a true and correct view of the state of the Council's affairs, according to the best of our information and the explanations given to us, and as shown by the Books of the Council.

(Signed) THORNTON & THORNTON,

8 King Edward Street, Oxford.

Chartered Accountants and Auditors.

THE BERKS., BUCKS. AND OXON REGIONAL HOSPITALS COUNCIL

MEDICAL ADVISORY COMMITTEE

Chairman :

G. E. Gask, C.M.G., D.S.O., F.R.C.S.
(Emeritus Professor of Surgery, University of London)

*Branch of Medicine
represented*

Vice-Chairman :

G. C. Williams, O.B.E., M.R.C.S., L.R.C.P., D.P.H. Public Health
(Medical Officer of Health, City of Oxford)

Hon. Medical Secretary :

A. H. T. Robb-Smith, M.D. Pathology
(Radcliffe Infirmary, Oxford)

Members :

H. C. Jennings, M.B., B.S., D.P.H. Public Health
(Medical Officer of Health, Oxfordshire)

E. C. H. Huddy, M.D., B.S., M.R.C.S., L.R.C.P., D.P.H. Public Health
(Medical Officer of Health, Berkshire)

S. L. Wright, M.D., M.R.C.P., D.P.H. Public Health
(Medical Officer of Health, Reading)

G. W. H. Townsend, M.B., B.Ch., B.A.O., D.P.H. Public Health
(Medical Officer of Health, Buckinghamshire)

F. G. Hobson, D.S.O., D.M., F.R.C.P. Medicine
(Radcliffe Infirmary, Oxford)

H. S. Le Marquand, M.D., M.R.C.P. Medicine
(Royal Berks. Hospital, Reading)

L. J. Witts, M.D. Manch., D.M. Oxon, F.R.C.P. Medicine
(Nuffield Professor of Medicine, University of Oxford)

J. Gaymer Jones, M.C., M.S., F.R.C.S. Surgery
(King Edward VII Hospital, Windsor)

N. A. Miller, F.R.C.S. Surgery
(King Edward VII Hospital, Windsor)

T. G. Scott, F.R.C.S. Surgery
(Newbury District Hospital)

R. Strang, F.R.C.S. Surgery
(Royal Bucks. Hospital, Aylesbury)

J. A. Stallworthy, F.R.C.S., M.R.C.O.G. Obstetrics and
(Radcliffe Infirmary, Oxford) Gynaecology

R. G. Macbeth, F.R.C.S. Otorhinolaryngology
(Radcliffe Infirmary, Oxford)

G. T. Willoughby Cashell, F.R.C.S.Edin.	Ophthalmology
(Royal Berks. Hospital, Reading)	
H. J. Seddon, D.M., F.R.C.S.	Orthopaedic Surgery
(Nuffield Professor of Orthopaedic Surgery, University of Oxford)	
Ian Skottowe, M.D., D.P.M.	Psychiatry
(Royal Bucks. Hospital, Aylesbury, and Bucks. County Mental Hospital, Stone)	
W. Stobie, O.B.E., M.D., F.R.C.P.	Tuberculosis
(Radcliffe Infirmary, Oxford, and Consultant Tuberculosis Officer, Oxford City Council and Oxfordshire County Council)	
E. R. C. Cooke, M.C., M.R.C.S., L.R.C.P.	General Practice
(British Medical Association, Berks., Bucks. and Oxon Branch)	
J. A. Ryle, M.D., F.R.C.P.	Social Medicine
(Professor of Social Medicine, University of Oxford)	
H. M. Sinclair, D.M.	Nutrition
(Fellow and Tutor in Physiology, Magdalen College, Oxford)	
A. W. M. Ellis, O.B.E., D.M.Oxon, M.D.Toronto, F.R.C.P.	Faculty of Medicine, University of Oxford
(Regius Professor of Medicine, University of Oxford)	

Substitute Members for Members on Active Service :

R. H. Gardiner, M.Ch., F.R.C.S.Edin.	Surgery
(Royal Bucks. Hospital, Aylesbury)	
Ida Mann, D.Sc., F.R.C.S.	Ophthalmology
(Professor of Ophthalmology, University of Oxford)	

Consultative Member :

Eric Donaldson, O.B.E., M.D., D.P.H.
(Principal Regional Medical Officer, Ministry of Health, Region 6)

Secretary :

George Watts, F.H.A.

REPORT OF THE MEDICAL ADVISORY COMMITTEE, 1941-1946

Introduction

When, in the autumn of 1940, through the influence of the Nuffield Provincial Hospitals Trust, a Regional Hospitals Council was formed for Berks., Bucks. and Oxon, a Medical Advisory Committee was appointed for the purpose of assisting the Council to carry out those of its functions relating to the development or extension of hospital and ancillary services.

No attempt was made in the constitution of the Committee to secure representation of particular interests or organisations; instead, the individual members were selected primarily for personal ability and experience, though it has worked out in practice that no major local authority or principal hospital is without a representative.

The years that followed the appointment of the Committee were not easy ones. For five of them this country was at war, and the calls on the time of every member were exceptionally heavy, but nevertheless the Committee has been constantly at work on schemes for the development of various aspects of the hospital services, and has produced a number of valuable reports which will be referred to in more detail later.

It is with regret that the Committee has to record that so few of them have as yet been implemented. The impact of the war was to some extent responsible for this disappointing state of affairs, but it has also to be borne in mind that the Regional Hospitals Council is a non-statutory advisory body, and lacks the executive authority needed to give practical effect to the proposals it puts forward.

It is only fair to add that throughout much of the period covered by this report considerable uncertainty prevailed as to the future responsibility for the administration of the health services. This uncertainty no longer exists, however, and the Committee hopes that its work may be of assistance to the bodies charged with the administration of the services, and that its schemes may be brought to fruition.

For the most part the Committee has found it convenient to work through Sub-Committees, which have been appointed as and when necessary, and to which, whenever circumstances demanded it, members from outside the Committee were added so as to take advantage of expert opinion and specialised knowledge.

In presenting this report of its proceedings to the Regional Hospitals Council, the Committee expresses its thanks and appreciation to all who have so willingly placed their knowledge and experience at its disposal.

The Regional Survey

One of the earliest tasks undertaken by the Committee was a survey of the hospital and ancillary services available in the region in 1941. A questionnaire drawn up by Dr. Robb-Smith and Mr. Sanctuary in consultation with the Administrative Advisory Committee was used for the Survey, and the information so collected was recorded by the card index method. Each hospital in the region subsequently received a visit from members of the Survey Sub-Committee, consisting of Mr. E. C. Bevers, the late Sir Farquhar Buzzard, Professor G. E. Gask and Dr. Robb-Smith, with Miss D. M. Livock, Accountant to the Nuffield Trust, as Secretary.

Although the Ministry of Health eventually decided that the official survey of the region would have to be based on the year 1938, so as to link up with the surveys of the rest of the country, the original survey was an important piece of work and proved of considerable value to the surveyors when they came to make the official survey.

Accident Services. (Ref. I, 1-5)

Following the successful establishment in 1941 of an Accident Service at the Radcliffe Infirmary, Oxford, an Accident Service Sub-Committee was appointed to prepare recommendations for the establishment of similar services throughout the region, all of which would have a working liaison with that at Oxford.

The Sub-Committee reported that there was a general desire for such a service, though lack of satisfactory accommodation and permission to build, and in particular the lack of personnel because of the disorganisation of medical services as a result of the war, was a serious bar to progress.

As a direct outcome of the recommendations of this Sub-Committee, Accident Services were established the following year at the King Edward VII Hospital, Windsor, and the Royal Buckinghamshire Hospital, Aylesbury.

The Nuffield Provincial Hospitals Trust made grants through the Regional Council of £2,500 to the Radcliffe Infirmary, £1,000 to the King Edward VII Hospital, Windsor, and £750 to the Royal Buckinghamshire Hospital, Aylesbury, towards the establishment of these services.

Anaesthetic Service. (Ref. II, 6)

The Sub-Committee appointed to report on the Anaesthetic Services of the region reached agreement on the following points :—

- (i) There is a shortage of both specialist anaesthetists and of resident anaesthetists at the present time.
- (ii) The position of anaesthetists at some of the smaller hospitals is frankly unsatisfactory.
- (iii) It is desirable that all anaesthetist appointments in the region should be publicly advertised and restricted to candidates with special training and experience.
- (iv) It is important that the services of anaesthetists should be remunerated adequately.

The method of remuneration was not fully discussed, and opinion in the Sub-Committee on the general question of how the anaesthetic services in the region should be organised was not sufficiently crystallised to enable the Committee to make recommendations to the Regional Hospitals Council.

Arrangements were made, however, with the Nuffield Professor of Anaesthetics in the University of Oxford to pay informal visits to the anaesthetists in the region and discuss their difficulties with them, and it is a pleasure to record that individual hospitals in the region subsequently took action to implement recommendation number (iii) above. The Sub-Committee is still in being, as the Medical Advisory Committee considers that further steps are required to improve the Service.

Blood Transfusion Services. (Ref. III, 7)

In 1944 the Committee conducted an enquiry into the Blood Transfusion Services in the region, with a view to ascertaining whether it would be possible to formulate proposals for a uniform method of organisation throughout the region. The enquiry elicited some useful information, but in view of the divergence of opinion on the subject of clinical responsibility for transfusions, and the fact that the Service was organised on very different lines in each of the three Divisions in the region, it was impossible at that stage to formulate a unified scheme for the region.

Cancer Service. (Ref. IV, 8)

In 1942 the Medical Advisory Council of the Nuffield Trust undertook a survey of the incidence of cancer in the area of the Oxford and District Joint Hospitals Board. This survey was carried out by Professor Gask and Dr. Robb-Smith, whose report was presented both to the Medical Advisory Council of the Trust and to the Medical Advisory Committee of the region in December, 1944. It was subsequently amended and used as a basis for the drafting of the Cancer Scheme referred to below.

Following a conference of major local authorities and voluntary hospitals convened by the Right Worshipful the Mayor of Oxford in December, 1944, the County and County Borough Councils of Northampton and the Northampton General Hospital accepted an invitation to associate themselves with the Regional Council in the preparation of a Cancer Scheme for the counties of Berks., Bucks., Northants. and Oxon. Then, at the request of the local authorities concerned, the Medical Advisory Committee undertook, with the assistance of *ad hoc* representatives from Northampton, to make a survey of the existing facilities in the enlarged region and to produce a scheme for bringing the cancer service up to a state of full efficiency.

The Committee's report was presented to the Regional Hospitals Council in January, 1946, and circulated to the authorities and hospitals concerned, as well as to the Minister of Health and the National Radium Commission. The Minister of Health has expressed his interest in the scheme.

The Committee takes this opportunity of warmly thanking its Northamptonshire colleagues for their valued assistance and co-operation in the production of the report, and of acknowledging its indebtedness to the survey made by Professor Gask and Dr. Robb-Smith, a survey which was the only one of its kind undertaken in this country and which has been of considerable service to other parts of the country where cancer schemes have been under consideration. The Committee was also privileged to have the advice and assistance of Sir Ernest Rock Carling and Lord Amulree

(Chairman and Secretary respectively of the Minister of Health's Advisory Sub-Committee on Cancer) and of Dr. G. F. Stebbing of the National Radium Commission.

Ear, Nose and Throat. (Ref. V, 9)

With Mr. R. G. Macbeth as Chairman and Convener, the Ear, Nose and Throat Services Sub-Committee carried out in 1943 a comprehensive survey of the otolaryngological services in the region and presented their report, with recommendations for the organisation of the services on a regional basis, to the Medical Advisory Committee in November of that year.

The report was subsequently presented to the Regional Hospitals Council and circulated to all constituent local authorities and voluntary hospitals in the region. It was also included as an appendix to the report of the surveyors appointed by the Nuffield Provincial Hospitals Trust, in association with the Ministry of Health, to survey the Berks., Bucks. and Oxon region, and has been published as part of the official report. It is particularly regrettable that the many valuable recommendations contained in this report have not been put into effect, and the hope is expressed that steps may soon be taken to implement them.

Health and Sickness Records. (Ref. VI, 10)

It was as a result of a recommendation from the Medical Advisory Committee that the Statistical Committee of the Medical Research Council conferred with members of the Committee at Oxford on the possibility of adopting a uniform system of nomenclature for the compilation of medical statistics. This meeting led eventually to the publication by the Medical Research Council of *A Provisional Classification of Diseases and Injuries for use in compiling Morbidity Statistics*, prepared by its Committee on Hospital Morbidity Statistics, whose Secretary was Dr. A. H. T. Robb-Smith.

A further outcome of this initial meeting, and one of immediate practical importance to the Berks., Bucks. and Oxon region, was the decision of the Nuffield Provincial Hospitals Trust (after consultation with representatives of the Ministry of Health and the Medical Research Council) to undertake two experiments on a regional basis as a preliminary to the setting up of a National Bureau of Morbidity Statistics. This region was selected for one of the experiments, and so, with the approval of the Regional Council, the Bureau of Health and Sickness Records came into being. The Bureau presents its reports to the Regional Council through the Medical Advisory Committee.

Mass Radiography. (Ref. VII, 11-13)

The Committee considered in 1942 the desirability of recommending the introduction into the region of the system of Mass Radiography for the detection of early cases of pulmonary tuberculosis.

A comprehensive and detailed report on this subject was prepared for the Committee by Dr. E. P. H. Cave, and a memorandum by Dr. F. H. Kemp (Assistant Radiologist to the Radcliffe Infirmary) was also considered. The Committee reported:—

- (a) that Mass Radiography was a valuable method of detecting early cases of pulmonary tuberculosis, and the Committee would be prepared to recommend its adoption in the region, provided that all essential safeguards for the worker could be achieved; and
- (b) that the Regional Hospitals Council be recommended to consider the submission of a memorandum to the Ministry of Health on the social and personnel difficulties involved.

These recommendations were eventually submitted by the Regional Hospitals Council to the Conference of Local Authorities which was at that time beginning its consideration of a Tuberculosis Scheme for the region.

Maternity Services. (Ref. VIII, 14)

One of the most important pieces of work for which the Committee has been responsible, and the most recently completed, is the report on a Comprehensive Maternity Service for the Berks., Bucks. and Oxon region.

The report originated in May, 1945, in a recommendation from the Committee that the constituent major local authorities should be asked if they would be willing to invite the Regional Hospitals Council to set up a Sub-Committee to prepare a scheme. This they all agreed to do, and a Sub-Committee, representative of all branches of the service, including the nursing services, was appointed.

Having drawn up and agreed a set of principles on which a regional maternity service should be based, the Sub-Committee then divided itself up into divisional sections to which were co-opted representative medical practitioners from a wide area. Each of the sections was responsible for the preparation of a report on the needs of its respective division, the three divisional reports being then collated into a single report for the region.

After approval by the Medical Advisory Committee, the report was presented to the Regional Hospitals Council in May, 1946, and has been circulated to the local authorities, voluntary hospitals and other organisations concerned as well as to the Ministry of Health and the Royal College of Obstetricians and Gynaecologists.

The Committee takes this opportunity of recording its thanks to all who helped in the preparation of the report, and in particular to Dr. G. F. Gibberd of Guy's Hospital and Queen Charlotte's Maternity Hospital, and Professor Alan Moncrieff, Professor of Child Health in the University of London, both of whom joined the Sub-Committee and made valuable contributions to the discussions and the report.

The reports of the divisional sections, together with memoranda on regional ante-natal and post-natal services and on a mobile flying squad, were published as appendices to the main report.

Nutrition. (Ref. IX, 15-16)

At the beginning of 1941, the Committee considered a proposal that a nutritional and dietetic survey of the region should be carried out and sponsored by the Regional Hospitals Council. After consultation with the Nuffield Provincial Hospitals Trust it was concluded that a pilot survey on a modified basis would be more useful in the circumstances then prevailing, and proposals to that end were put forward, with a recommendation that the scheme as revised should be forwarded to the Medical Advisory Council of the Trust and commended for the favourable consideration of the Medical Research Council and other bodies.

This recommendation was acted upon and the pilot survey was put in hand, with the support of the Medical Research Council, the Rockefeller Foundation and the Nuffield Trust for Dominion Scholars.

It was subsequently learned that the Ministry of Health were anxious that supplementary food tests should be carried out on pregnant women, and on the Committee's recommendation the Regional Hospitals Council approved of the carrying out of the tests by the Oxford Nutrition Survey and made a grant of £350 for the purpose. The tests were duly made, groups of pregnant and lactating women being selected for study, and a detailed report on the results was presented to the Medical Advisory Committee and the Regional Council in 1944.

Ophthalmic Services. (Ref. X, 17)

A Sub-Committee, with Squadron-Leader G. T. W. Cashell as Chairman, began in 1942 a comprehensive survey of the ophthalmic services available in the region, and presented their report, with detailed recommendations for the organisation of the services on a regional basis, to the Medical Advisory Committee in November, 1942. The report was submitted to the Regional Hospitals Council in the following month, and circulated to all local authorities and voluntary hospitals in the region.

Like the report on the Ear, Nose and Throat Services, it was included as an appendix to their report by the surveyors appointed by the Nuffield Provincial Hospitals Trust, in association with the Ministry of Health, to survey the hospital and ancillary medical services in the Berks, Bucks. and Oxon region, and was printed and published as part of that report. On this subject also the Committee regrets that little or no action has been taken to implement the many valuable recommendations contained in the report and hopes that steps may now be taken to do so.

Pathological Service. (Ref. XI, 18-25)

Soon after its appointment the Committee embarked upon a study of the Pathological Services in the region, with the immediate purpose of drawing up recommendations for improving the services available to the Local Authorities, Voluntary Hospitals and General Practitioners in the region, as far as such improvements could be made in wartime, but with the ultimate aim of formulating a scheme for a regional pathological service.

After consideration of numerous reports submitted by the Pathological Services Sub-Committee, the Committee came to the conclusion that because of the limitations imposed by war conditions it would not be possible to expand the service to the fullest extent desirable, but that a considerable

improvement in the service could be effected, particularly by the establishment of subsidiary laboratories in the smaller hospitals, with qualified and technical staff attending from the main divisional laboratories.

A report to that effect was accordingly presented to the Regional Hospitals Council, with a recommendation that it was urgently desirable that the Emergency Public Health Laboratory, Oxford (then housed at the Sir William Dunn School of Pathology), and the hospital laboratory at the Radcliffe Infirmary should work in a common laboratory. It was suggested that this could be achieved by erecting a temporary hut laboratory at the Radcliffe Infirmary to accommodate Public Health Bacteriology, Hospital Bacteriology and Clinical Pathology, with the morbid anatomical and biochemical laboratories remaining in their present quarters.

The proposals were approved by the Regional Hospitals Council, and a promise of a grant of £1,500 for equipping the temporary laboratories was secured from the Nuffield Provincial Hospitals Trust.

Negotiations between the Radcliffe Infirmary and the Ministry of Health led in due course to the erection of the temporary laboratories, and this part of the Committee's recommendation has been carried into effect.

Physical Medicine. (Ref. XII, 26, 27)

In 1941 the Committee considered a suggestion that because of difficulties of distance, transport and overcrowding, the work of the Physical Medicine Service should be decentralised by establishing clinics at the smaller hospitals in the region, staffed by masseuses working under the direction of the Physical Medicine specialists at the key hospitals, and needing only the simpler forms of equipment. Clinics on these lines had already been established at Abingdon and Banbury in the area of the Oxford and District Joint Hospitals Board.

The report of the Sub-Committee to which this matter was referred defined the scope of Physical Medicine and expressed the opinion that the time was not yet ripe nor the personnel sufficient for a full scheme of regionalisation on the lines suggested, and on the advice of the Medical Advisory Committee no further extension of the service has been undertaken, except in one or two instances where local clinics have been opened, staffed by masseuses working under the direction of local medical officers.

Planning of Hospital Services. (Ref. XIII, 28-30)

During 1943 and 1944 each of the three Divisional Councils in the region appointed special committees to prepare plans for the post-war development of the hospital services in their respective areas. It seemed clear that one of the principal tasks with which these committees would be confronted would be that of assessing the needs of their areas in regard to hospital beds and medical staff.

To assist them in their deliberations, Professor Gask prepared the following memoranda:—

Memorandum on the ratio of hospital beds to population B.B.O. M.A.C. Beds 1/44.

Memorandum on the total number of hospital beds J.H.B. Plan. Mem. 1/44
required for all purposes per 1,000 of population ... (revised)

Memorandum on the medical staff required for a first-class
hospital J.H.B. Plan. Mem. 2/44

These memoranda were given detailed consideration by the Committee, and after approval and amendment were remitted to the Divisional Planning Committees, each of which has made extensive use of them in the preparation of its report.

Psychological Medicine. (Ref. XIV, 30-33)

Early in 1942 a Sub-Committee, with Dr. Ian Skottowe as convener, was appointed to make a preliminary report on the Psychological Medicine Services in the region, with a view to a comprehensive survey at a later date.

The report presented in due course included a detailed statement of the facilities then available and of the probable future requirements, as well as suggestions for the composition of a committee to make the wider survey. It was submitted to the surveyors appointed by the Nuffield Provincial Hospitals Trust in association with the Ministry of Health, to survey the Berks., Bucks. and Oxon region, and was included in the official report of the survey.

The enlarged committee was duly appointed and held several meetings, and reached the conclusion that from whatever point of view the services were reviewed, the principal need was for a Psychiatric Unit in the region. It was felt that such a Unit was essential in order to secure the future progress of Psychiatry, and an improved service for the public.

A memorandum embodying these views was prepared and submitted to the Regional Hospitals Council with a view to appropriate action being taken at an opportune moment to implement the proposals.

The Committee is greatly indebted to those who gave so much time to the preparation of the report and memorandum, and would mention in particular the valuable help and guidance of Dr. Aubrey Lewis of the Maudsley Hospital, London, and the Rt. Hon. Lord Roche.

Radio-Therapeutic Services. (Ref. XV, 34, 35)

Two years before the setting up of the Cancer Sub-Committee a Sub-Committee was appointed to make a preliminary report on the radio-therapeutic services in the region. The report of this Sub-Committee, which was drawn up in consultation with Lord Donoughmore (Chairman of the Radium Commission) and Mr. (now Sir Ernest) Rock Carling (Chairman of the Minister of Health's Advisory Committee on Cancer), was available for the small technical Sub-Committee appointed by the Cancer Sub-Committee in 1945, and, with later amendments and additions, was published as an appendix to the Cancer Scheme for Berks., Bucks., Northants. and Oxon.

Tuberculosis. (Ref. XVI, 36-40)

Throughout 1940 and 1941 the Committee had under review several aspects of the Tuberculosis Service, in particular the need for the establishment of a Thoracic Surgical Unit, a recommendation for the construction of a hospital unit devoted to the care of patients suffering from the more complex forms of tuberculosis, and the urgent need for additional sanatoria accommodation in the region.

Reports and recommendations on these matters were submitted through the Regional Hospitals Council to the local authorities and voluntary hospitals concerned, and then, in 1942, following a conference of the major local authorities convened at their request by the Regional Council, the Committee was asked :—

“to explore the possibilities of co-operation between local authorities in the region in connection with the provision of an adequate Tuberculosis Service for the region as a whole and to make recommendations thereon.”

The Tuberculosis Sub-Committee were accordingly requested to undertake this task, and their report, when completed, dealt with every aspect of the problem and outlined the methods by which the desired result could be achieved. It was eventually submitted, after approval by the Committee, through the Regional Hospitals Council to the local authorities concerned, at a further meeting of the Tuberculosis Conference.

Conclusion

The foregoing report does not cover all the matters dealt with by the Medical Advisory Committee since its inception six years ago, though it does cover those which have been the subject of reports.

Besides these, however, there have been other matters too numerous to refer to in detail which have been referred to the Committee for observation and advice, and the Committee feels it has fulfilled a useful function in placing at the disposal of the constituent local authorities and voluntary hospitals in the region the collective knowledge and experience of a committee representative of many branches of medicine.

The late Sir Farquhar Buzzard

A report of this nature would not be complete without a reference to the grievous loss the Committee sustained through the death of the late Sir Farquhar Buzzard.

Although not a member of the Committee, he attended nearly all its meetings in a consultative capacity from the coming into existence of the Committee until his death in December, 1945. His wise advice and guidance were at all times a tower of strength to the Committee, who have lost in him a valued friend and counsellor.

The Committee regrets also to have to record the death of Dr. H. J. Milligan, Medical Officer of Health of the County Borough of Reading.

INDEX TO COLLECTION OF SURVEYS, REPORTS AND MEMORANDA PREPARED BY OR FOR THE COMMITTEE

<i>Title</i>	<i>Prepared by</i>	<i>Year</i>	<i>Ref. No.</i>
I. Accident Services :			
(1) Report of the Accident Services Sub-Committee.	The Sub-Committee.	1942	B.B.O. R.H.C. M.A.C. X. C.
(2) Amended Report of the Accident Services Sub-Committee.	Ditto	1943	B.B.O. M.A.C. M. 1/43 (c)
(3) The Accident Service at the Radcliffe Infirmary.	Mr. A. G. E. Sanctuary.	1942	—
(4) Memorandum on the Establishment of an Accident Service at the Royal Bucks. Hospital, Aylesbury.	Mr. F. G. Dawes.	1942	—
(5) Memorandum on the Establishment of an Accident Service at the King Edward VII Hospital, Windsor.	Mr. G. Weston.	1943	B.B.O. M.A.C. M. 1/43 (d)
II. Anaesthetic Services :			
(6) Report of the Anaesthetic Services Sub-Committee.	The Sub-Committee.	1944	B.B.O. M.A.C. Anaes. 1/44
III. Blood Transfusion Service :			
(7) Analysis of replies to Questionnaire on Blood Transfusion Services in the Region.	The Sub-Committee.	1944	B.B.O. M.A.C. B.T.S. 2/44
IV. Cancer Service :			
(8) A Cancer Service for Berks., Bucks., Northants. and Oxon (including a Survey of the Incidence of Cancer in the Area of the Oxford and District Joint Hospitals Board).	The Cancer Sub-Committee.	1945	Printed and circulated
V. Ear, Nose and Throat Services :			
(9) Report on the Ear, Nose and Throat Services in the Region.	The Ear, Nose and Throat Services Sub-Committee.	1943	—
VI. Health and Sickness Records :			
(10) Memorandum on Regional Hospital and Morbidity Statistics.	Dr. A. H. T. Robb-Smith (for the Medical Advisory Council of the Nuffield Trust).	1942	Printed and circulated

	<i>Title</i>	<i>Prepared by</i>	<i>Year</i>	<i>Ref. No.</i>
VII. Mass Radiography :				
(11)	Report of the Mass-Radiography Sub-Committee.	The Sub-Committee.	1942	B.B.O. R.H.C. M.A.C. X.
(12)	Miniature Mass-Radiography: a suggested scheme for the Berks., Bucks. and Oxon Region.	Dr. E. P. H. Cave, with Addendum by Dr. S. L. Wright.	1942	—
(13)	Ditto	Memorandum by Dr. F. H. Kemp.	1942	—
VIII. Maternity Services :				
(14)	A Comprehensive Maternity Service for Berks., Bucks. and Oxon (including an Appendix on a Regional Ante- and Post-Natal Service).	Maternity Services Sub-Committee.	1946	Printed and circulated
IX. Nutrition :				
(15)	The Nutrition of Women during Pregnancy and Lactation.	Oxford Nutrition Survey.	1944	B.B.O. M.A.C. Nut. 1/44
(16)	Ditto (General Summary.)	Ditto	1944	B.B.O. M.A.C. Nut. 1/44 (a)
X. Ophthalmic Services :				
(17)	Report on the Ophthalmic Services in the Region.	Ophthalmic Services Sub-Committee.	1943	Printed and circulated
XI. Pathological Services :				
(18)	Pathological Services in the Berks., Bucks. and Oxon Region.	Dr. A. Q. Wells.	1940-41	—
(19)	Pathological Services in the Oxford Region.	Pathological Services Sub-Committee.	do.	—
(20)	Report by the Sub-Committee on the above.	Ditto	do.	—
(21)	Minutes of a Meeting of the Sub-Committee.	Ditto	do.	—
(22)	Pathological Laboratory at the Radcliffe Infirmary.		do.	—
(23)	Draft Proposals for the Oxford Regional Pathological Laboratory.		do.	—
(24)	Memorandum on Proposed Scheme for Regionalisation of Pathology.	Dr. A. H. T. Robb-Smith.	do.	Printed and circulated
(25)	Two Memoranda on above.	The late Sir Farquhar Buzzard.	do.	—

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XII. Physical Medicine :			
(26) Memorandum for a Scheme for the Regionalisation of the Physical Medicine Service.	Dr. B. Kiernander.	1941	—
(27) Comments on the above.	Physical Medicine Sub-Committee.	1941	—
XIII. Planning :			
(28) Memorandum on the Ratio of Hospital Beds to Population.	Professor Gask.	1944	B.B.O. M.A.C. Beds. 1/44
(29) Memorandum on the Total Number of Hospital Beds required for all purposes per 1,000 Population.	Ditto	1944	J.H.B. Plan. Mem. 1/44 (revised)
(30) Memorandum on the Medical Staff required for a First-class Hospital.	Ditto	1944	J.H.B. Plan. Mem. 2/44
XIV. Psychological Medicine :			
(31) Preliminary Report on Psychological Medicine Services in the Region.	Psychological Medicine Sub-Committee.	1942	—
(32) Memorandum on the Need for a Psychiatric Teaching Unit in Regional Health Services.	Ditto	1944	B.B.O. M.A.C. Ps. M. 1/44
(33) Ditto (Revised.)	Ditto	1944	B.B.O. M.A.C. Ps. M. 2/44 (revised)
(34) Ditto (Second Revision.)	Ditto	1944	B.B.O. M.A.C. Ps. M. 2/44 (2nd revision)
XV. Radio-Therapeutic Services :			
(35) Preliminary Report of the Radio-Therapeutic Services Sub-Committee.	The Sub-Committee.	1943	B.B.O. M.A.C. M. 3/43 (a)
(36) Minutes of a Meeting of the Radio-Therapeutic Services Sub-Committee.	Ditto	1944	B.B.O. M.A.C. RT. 1/44
XVI. Tuberculosis :			
(37) Minutes of a Meeting of the Tuberculosis Sub-Committee.	The Sub-Committee.	1941	B.B.O. M.A.C. RT. 1/44
(38) Memorandum on the Establishment of a Thoracic Surgical Unit.	Mr. T. Holmes-Sellers.	1942	—

	<i>Title</i>	<i>Prepared by</i>	<i>Year</i>	<i>Ref. No.</i>
(39)	Memorandum on the Construction of a Unit for the more complex forms of Tuberculosis.	Professor H. J. Seddon and Dr. W. Stobie.	1942	—
(40)	Amended Report of the Tuberculosis Sub-Committee.	The Sub-Committee.	1942	—
(41)	Final Report of the Tuberculosis Sub-Committee.	Ditto	1942	B.B.O. R.H.C. M.A.C. XI (a)

THE BERKS., BUCKS. AND OXON REGIONAL HOSPITALS COUNCIL

ADMINISTRATIVE ADVISORY COMMITTEE

Representing :

Mr. E. C. Bevers, F.R.C.S. (<i>Chairman</i>)	...	The Radcliffe Infirmary, Oxford.
Mr. A. G. E. Sanctuary, M.A. (<i>Hon. Secretary</i>)	...	Ditto
Professor G. E. Gask, C.M.G., D.S.O., F.R.C.S.	...	Chairman, Medical Advisory Committee.
Mrs. V. Benyon	...	Royal Berkshire Hospital, Reading.
Mr. F. G. Dawes, F.C.I.S., F.H.A.	...	Royal Bucks. Hospital, Aylesbury.
Mr. K. N. Knapp	...	Swindon and North Wilts. Victoria Hospital.
Dr. H. S. Le Marquand	...	Royal Berkshire Hospital, Reading.
Mr. W. Maxwell Mason	...	Royal Berkshire and Associated Hospitals Contributory Scheme.
Mr. R. H. Prescott, F.H.A.	...	Horton General Hospital, Banbury.
Mr. H. E. Ryan, F.H.A.	...	Royal Berkshire Hospital, Reading.
Mr. G. Weston, F.H.A.	...	King Edward VII Hospital, Windsor.
Dr. A. H. T. Robb-Smith	...	Hon. Med. Secretary, Medical Advisory Com- mittee.
Mr. E. Barber, A.H.A.	...	High Wycombe and District War Memorial Hospital.
Mr. J. S. Holdstock	...	Newbury District Hospital.
Mrs. R. Godfrey	...	Maidenhead Hospital.

Secretary : Mr. George Watts, F.H.A.

REPORT OF THE ADMINISTRATIVE ADVISORY COMMITTEE

1940-1945

The constitution of the Berks., Bucks. and Oxon Regional Hospitals Council provides for the appointment of Standing Advisory Committees to advise the Council on matters arising out of the fulfilment of its services throughout the region.

An Administrative Advisory Committee was accordingly appointed soon after the formation of the Regional Council, and its functions were defined as follows :—

1. To consider and report on matters referred from the Regional Hospitals Council and the Regional Medical Advisory Committee.
2. To advise the Regional Council in regard to :—
 - (a) The standardisation of administrative services.
 - (b) The building, enlargement and new development of hospitals.
 - (c) The collection and co-ordination of statistics, financial and otherwise.
 - (d) The co-ordination of special appeals and other efforts for raising funds for voluntary hospitals.
 - (e) The organisation of joint purchasing schemes.
3. To perform such other functions as may be desired by the Regional Council.

Some of these functions proved impossible of fulfilment because of war conditions. The building, enlargement and new development of hospitals, for instance, was entirely at a standstill, except for a few quite small but urgent schemes which did not call for joint consideration. Similarly the methods of purchasing engendered by war conditions left no opportunity for the organisation of joint purchasing schemes, and with two exceptions there were no special appeals to co-ordinate.

But perhaps the most important factor in limiting the work of the Committee was the increasingly heavy burden of work which fell on the chief administrative officers of the hospitals and their staffs. The one attempt which was made to collect statistical information made it quite clear that the administrative staffs, denuded as they were of members of an age for military or other forms of national service, could not be expected to cope with additional demands for information which could in any event serve no useful purpose until a return to more normal conditions.

Notwithstanding all these difficulties, the Committee did undertake some useful pieces of work, and was able to advise the Regional Council on a number of matters, some of which are referred to more fully below.

Regional Survey

The survey of the hospital and ancillary services in the region, undertaken by the Medical Advisory Committee before a decision was reached by the Ministry of Health to make an official survey, called for the preparation of a form of questionnaire to be submitted to all hospitals in the region. The questionnaire was drafted by Mr. Sanctuary and Dr. Robb-Smith on behalf of the Medical Advisory Committee, and referred to this Committee for comment. A number of suggestions for amendment were put forward and incorporated in the form eventually used. The Committee also prepared a questionnaire on contributory schemes, which was used for the same survey.

Investigation of Hospital Costs

The Committee undertook an enquiry into hospital costs, consumption statistics and prices, by means of a questionnaire sent out to all hospitals in the region, the replies being carefully tabulated and studied in detail.

Although, for reasons stated above, the investigation could not be continued, the Committee is convinced that in normal times it would have been well worth while and could have had valuable results in effecting economies of administration.

Statistical Recording of Patients

Two matters concerned with patients' statistics came under review.

In the first place it was necessary to arrive at a definition of a new out-patient, to enable all voluntary hospitals in the region to prepare their statistics on the same basis for the returns on which distribution of local authority subscriptions is made.

The Committee defined a new out-patient as one whose first attendance of a continuous series for the same ailment (or whose single attendance, if only one is needed) falls within the year under review, and made recommendations as to the keeping of registers, attendance at more than one department, and other matters.

It was largely as a result of the discussions on this question that the Committee subsequently invited Miss D. M. Livock, Accountant to the Nuffield Provincial Hospitals Trust, to prepare for the Committee's consideration a report on out-patient registration procedure.

This Miss Livock very kindly consented to do, and the valuable and informative report which she submitted led the Committee to recommend to the Regional Council that all hospitals in the region should be urged to adopt the system therein outlined as far as it was practical to do so.

Out-Patients' Appointments

The Committee also turned its attention to the possibility of formulating a system of appointments for out-patients which could be recommended for adoption throughout the region. Mr. Stephen Merivale, who was at that time Assistant Administrator of the Radcliffe Infirmary (but has since taken up the appointment of House Governor and Secretary of the Bristol Royal Hospital) kindly prepared a report on the system in operation at the Radcliffe Infirmary and attended meetings of the Committee for the purpose of explaining it.

A recommendation was forwarded to the Regional Hospitals Council that the adoption of similar systems, adapted where necessary to the individual circumstances of each hospital, was desirable throughout the region. The Committee is glad to report that the recommendation was acted upon by several hospitals.

Recovery of Hospital Charges in Road and Industrial Accident Cases

During 1942 the Committee had under consideration the possibility of setting up, as part of the regional organisation, machinery for the recovery of hospital charges in road and industrial accident cases, and Captain P. L. Paterson, who was then on the staff of King Edward's Hospital Fund for London, kindly attended meetings to advise on the results obtained by the creation of similar machinery in London.

The Committee was convinced by the evidence before it of the need for such a scheme, but during the course of the discussions the basic petrol ration was withdrawn, and the cessation of private motoring led to a considerable falling-off in the numbers of cases which could have been dealt with. In the circumstances the development of the scheme was reluctantly abandoned.

System of Hospital Stores Issues and Records

Although it was impossible to proceed with the investigation of hospital costs and consumption, the Committee decided in 1943 to examine the question of stores issues and records and invited Mr. E. Holt, Steward of the Radcliffe Infirmary, to submit a report on the system in operation at the Radcliffe Infirmary, which it was known had effected considerable economies in the purchase and consumption of goods. Mr. Holt submitted a very informative report and also attended meetings of the Committee to explain the system and discuss it with the Committee.

The report was adopted by the Committee and forwarded to the Regional Council, on whose instructions it was sent to the principal hospitals in the region for information.

Financial Arrangements between Local Authorities, Voluntary Hospitals and Contributory Schemes

The Committee devoted considerable time in 1942 and 1943 to a study of the complicated tangle of arrangements in the region under which payments were made by local authorities to voluntary hospitals for the treatment of patients for whom the authorities had a statutory liability, and by contributory schemes to local authorities for such of their members as fell within this category, the latter payments being made to relieve the scheme members from assessment by the authorities.

Existing agreements were found to vary considerably as between the separate authorities, hospitals and schemes, and the Committee drafted proposals which, it was hoped, would lead to the adoption of uniform rates of payment throughout the region. Unfortunately the submission of these proposals to the Regional Hospitals Council coincided with the publication of the Coalition Government's White Paper, outlining its plans for a National Health Service, and it was not considered expedient thereafter to proceed with the discussions.

Group Preliminary Training Schools for Nurses

Schemes for the establishment of Group Preliminary Training Schools for Nurses, submitted through the Divisional Councils to the Regional Hospitals Council for approval in connection with applications to the Nuffield Provincial Hospitals Trust, for grants-in-aid, were remitted to this Committee for approval of the details. A memorandum on the general subject was prepared and forwarded to the Regional Council for information.

Conclusion

Other matters considered and reported upon by the Committee included : gifts under Deed of Covenant ; the possibility of organising a regional nursing service and a regional domestic service ; and the desirability of creating a reserve in the accounts for annual cleaning, renewals and repairs, the liability for which was accumulating owing to the impossibility of carrying out such works during the war.

THE BUCKS. AND EAST BERKS. DIVISIONAL HOSPITALS COUNCIL

Chairman :

Mr. A. Noel Mobbs, O.B.E. (The Slough Social Fund Ltd.).

Vice-Chairman :

Capt. L. M. Paterson (The Royal Buckinghamshire Hospital, Aylesbury).

Honorary Treasurer :

Mr. P. C. Raffety, J.P. (High Wycombe and District War Memorial Hospital).

Secretary :

Mr. George Watts, F.H.A., 16 King Edward Street, Oxford. (Tel. 2712).

The following local authorities, voluntary hospitals and other bodies are represented on the Council :—

Local Authorities :

County Councils : Berkshire ; Buckinghamshire ; Surrey.

Municipal Borough Councils : Aylesbury ; Chepping Wycombe ; Maidenhead ; New Windsor ; Slough.

Urban District Councils : Beaconsfield ; Chertsey ; Chesham ; Egham ; Eton ; Leighton Buzzard ; Linslade ; Marlow ; Staines ; Tring.

Rural District Councils : Amersham ; Aylesbury ; Bagshot ; Cookham ; Eton ; Leighton Buzzard ; Tring ; Windsor ; Wycombe.

Voluntary Hospitals (including Medical Staffs) :

King Edward VII Hospital, Windsor ; Royal Buckinghamshire Hospital, Aylesbury ; Slough Hospital Committee ; Maidenhead Hospital ; High Wycombe and District War Memorial Hospital ; Canadian Red Cross Memorial Hospital, Taplow ; Chalfonts and Gerrards Cross Hospital ; and the Cottage Hospitals at Ascot, Chesham, Egham, Iver, Denham and Langley, Marlow and Windlesham, and Valley End.

Contributory Schemes :

Windsor, Slough and Associated Hospitals ; Royal Buckinghamshire Hospital, Aylesbury ; High Wycombe and District War Memorial Hospital ; Chalfonts and Gerrards Cross Hospital ; Chesham Cottage Hospital ; Maidenhead and Marlow Hospitals.

Other Bodies :

The British Medical Association (Berks., Bucks. and Oxon Branch) ; The British Red Cross Society (Bucks. Branch) ; The St. John Ambulance Brigade (Bucks. and Berks. Divisions) ; The Bucks. and Berks. District Nursing Associations ; Slough Manufacturers' Association ; Slough Social Fund ; East Berks. United Sanitary Association.

REPORT FOR THE PERIOD ENDED 31st MARCH, 1946

The Council's last report was issued in 1941, soon after a number of important changes had taken place in its constitution. The voluntary hospitals at Aylesbury, Chalfonts and Gerrards Cross, Chesham, High Wycombe, Maidenhead and Marlow, all the local authorities in the area, and the Contributory Schemes, Ambulance Brigades and District Nursing Federations had accepted invitations to join the Council, and its name had been changed from the South Bucks. and East Berks. Voluntary Hospitals Council to the title it now bears. Furthermore, the responsibility for the organisation and control of the Windsor, Slough and Associated Hospitals Contributory Scheme had been transferred to a new Committee functioning as a separate organisation. These changes were subsequently completed by the transference to the King Edward VII Hospital, Windsor, and the Slough Hospital Building Fund Committee of the accumulated balances held on their behalf, and thereafter the Council functioned, and continues to function, as a Divisional Council associated with the Berks., Bucks. and Oxon Regional Hospitals Council.

In presenting the following report of its activities the Council desires to place on record its sincere appreciation of the willing co-operation and assistance it has always received from its associated voluntary hospitals and local authorities. The readiness of all concerned to join together in discussing their common problems has been most helpful, and the experience gained in working together during the last few years should be of great value when the new administrative machinery proposed in the National Health Service Bill is set up.

Planning of Hospital Services

Although in the prevailing conditions it was impossible to plan for the future with any degree of certainty, the Council felt in 1944 that a very useful purpose might be served by formulating proposals which, while avoiding any reference to administrative structure and responsibility, would at least indicate the lines on which the hospital services of the area should be developed.

Accordingly, with the approval of the Regional Hospitals Council, a Planning Committee was appointed for this purpose, and the Divisional Medical Advisory Committee, under the Chairmanship of Dr. Ian Skottowe, undertook the preparation of an interim report, which included a detailed survey of existing facilities. They were greatly helped in this task by having access to much of the information on which the official survey of the Berks., Bucks. and Oxon region was based, and to various memoranda prepared by Professor Gask.

This interim report formed the basis of the report which, with a supplementary report by the Assessment Sub-Committee and a comparison of the principal recommendations with the findings of the official surveyors, was adopted by the Council and circulated to its constituent authorities and hospitals. It has also been submitted to the Regional Council for integration with the reports of the other Divisional Councils.

The Council expresses its congratulations and thanks to all concerned with the production of the report, and especially to Dr. Skottowe, who devoted a considerable amount of time and skill to its preparation.

The section of the report devoted to the maternity services was drafted by a Sub-Committee of the Medical Advisory Committee. This Sub-Committee, of which Dr. G. W. H. Townsend was Chairman and Convener, co-opted a number of additional representatives with special experience in this field, and remained in being after the completion of its first report to prepare a more detailed report for inclusion in the Regional Medical Advisory Committee's Scheme for a comprehensive maternity service for the region.

Ambulance Services

It is of vital importance to the hospital service that it should be supported by an adequate ambulance service, available to everyone with a minimum of delay and untrammelled by considerations of finance or local boundaries.

With the object of ensuring that as far as possible such a service should be available throughout the Bucks. and East Berks. Division, the Council appointed in 1943 an Ambulance Services Advisory Committee, with Lady Barber as Secretary, to consider matters of policy, to make suggestions to the various ambulance-owning authorities in regard to the allocation of ambulances, and to endeavour to remove local boundary restrictions. The bodies concerned having given their approval, representatives of the St. John Ambulance Brigade, the British Red Cross Society, the Home Service Ambulance Committee and the Local Authorities (including the Police) were added to the Committee, which then carried out a comprehensive survey of the existing ambulance services.

The information obtained as a result of this survey was of considerable value when, some time later, the conference on ambulance services convened by the Bucks. County Council and presided over by Mr. Mobbs, appointed an Executive Sub-Committee to draft proposals for unifying the ambulance services throughout the county, as the Advisory Committee was in a position to define the needs of the area in general terms and present its views through the Chairman to the Conference Sub-Committee.

Emergency Bed and Ambulance Bureau

An interesting outcome of the work of the Ambulance Services Advisory Committee was the decision to establish an Emergency Bed and Ambulance Bureau to serve the southern part of the Division. Prior to the establishment of the Bureau a doctor confronted with an emergency case needing urgent admission to hospital, first had to find a vacant bed, which often necessitated a series of calls to different hospitals, and then had to obtain an ambulance, which probably meant a fresh series of calls. It is one of the many advantages of the Bureau that he no longer has to do this ; all that is necessary is a call to the Bureau, which obtains both hospital bed and ambulance. The Bureau is accommodated at the King Edward VII Hospital, Windsor, whose Secretary, Mr. Weston, manages it, and its administration is supervised by a Committee representative of the Hospitals, Local Authorities and Ambulance-owning authorities in the area it serves.

Another advantage of the Bureau is that it has arranged for the admission to hospitals in other areas, including London, of patients for whom beds in the hospitals associated with the Bureau were not available.

It should be added that control of the beds in the hospitals remains in the hands of the hospitals themselves and their respective medical staffs, and waiting list cases are not dealt with.

Accident Services

As a result of a report on the successful establishment of an accident service at the Radcliffe Infirmary, Oxford, the Regional Medical Advisory Committee recommended to the Regional Hospitals Council that the establishment of similar services elsewhere in the region, linked with the one at Oxford, should receive consideration.

Acting on this advice both the King Edward VII Hospital, Windsor, and the Royal Buckinghamshire Hospital, Aylesbury, prepared schemes and submitted them to the Council for approval, which was readily given. Notwithstanding the many difficulties arising from shortage of medical personnel and lack of adequate accommodation, the schemes were put into operation, and have considerably augmented the services of these two hospitals.

Group Preliminary Training Schools for Nurses

The Council has devoted considerable time to the possibility of establishing a Preliminary Training School for Nurses to serve a group of hospitals in the division, and at one time it seemed likely that a School to serve the Windsor, Aylesbury, Maidenhead and High Wycombe Hospitals would have been in existence by now. The hospitals concerned had, in fact, already agreed to co-operate in this matter, and the Nuffield Provincial Hospitals Trust had promised a substantial grant towards the capital and maintenance expenditure involved.

Unfortunately the impossibility of securing a suitable property in which to accommodate the School prevented the full scheme from materialising, but it is hoped to open on 1st January a joint School at Windsor for the King Edward VII Hospital, Windsor, and the Maidenhead Hospital, which will also take in nurses from the Newbury Hospital in the Reading Division. The Royal Buckinghamshire Hospital, Aylesbury, will provide its own School in which accommodation will be available if desired for student nurses from the High Wycombe War Memorial Hospital.

Local Authority Subscriptions

The Council desires to record once again its sincere appreciation of the generous contributions of the major Local Authorities, acting under their statutory powers, towards the maintenance of the voluntary hospital services in the Division. These contributions, amounting to more than £30,000 annually, are made on a regional basis and paid to the Regional Council, and the share received by this Division is in excess of £9,000, a welcome addition to their funds for which the voluntary hospitals are extremely grateful.

The Canadian Red Cross Memorial Hospital, Taplow

Although the Council has not, as a body, been concerned with the negotiations in regard to the Canadian Red Cross Memorial Hospital, Taplow, this report would be incomplete without a reference to this important addition to the hospital facilities available in the area.

Built and equipped by the Canadian Red Cross for the use of the Canadian Forces, the Hospital has now been handed over to the Ministry of Health by the Canadian Authorities, and is to become a specialist hospital, with a national status, for the treatment of rheumatic and cardiac diseases in children. It will be Canada's memorial to Canadians who fell in the war.

There is, however, a serious shortage of general hospital and maternity accommodation in the South Bucks. and East Berks. area, and, recognising the impossibility of meeting those needs by new building for some considerable time to come, the Canadian authorities have very kindly agreed that a part of the hospital should be set aside for the use of the area during the interim period.

The Council desires to place on record its sincere appreciation of this decision, which will be of inestimable value to the residents in that part of the Division.

Later in the year the Committee of the Hospital accepted an invitation to join the Divisional Council.

Conclusion

The foregoing report, while covering the more important matters, by no means exhausts the list of subjects dealt with by the Council. Reports on many other aspects of the hospital services have been submitted to the Council from time to time, and its advice or assistance has been sought on a number of occasions when questions of doubt or difficulty have arisen. The Council believes that in these and other ways, and especially by providing a meeting ground where those concerned with the provision of hospital services can discuss their mutual problems, it has fulfilled a necessary and useful function, which has been of considerable advantage to its constituent hospitals and authorities.

THE OXFORD AND DISTRICT JOINT HOSPITALS BOARD

Chairman :

The Rt. Hon. Lord Bicester, Lord Lieutenant of Oxfordshire.

Vice-Chairman :

Dr. A. Q. Wells (Oxfordshire County Council).

Honorary Treasurer :

Col. H. E. du C. Norris, D.L., J.P. (Horton General Hospital, Banbury).

Secretary :

Mr. George Watts, F.H.A., 16 King Edward Street, Oxford. (Tel. 2712).

The following local authorities, voluntary hospitals and other bodies are represented on the Board :—

Local Authorities :

County Councils : Berkshire ; Buckinghamshire ; Oxfordshire ; Wiltshire.

County Borough Council : Oxford City.

Municipal Borough Councils : Banbury ; Swindon.

Voluntary Hospitals (including Medical Staffs) :

The Radcliffe Infirmary, Oxford ; Wingfield-Morris Orthopaedic Hospital, Headington ; Oxford Eye Hospital ; Horton General Hospital, Banbury ; Swindon and North Wilts. Victoria Hospital ; Savernake Hospital, Marlborough ; National Heart Hospital, London (Maids Moreton Annexe) ; and the Cottage Hospitals at Abingdon, Bicester, Buckingham, Burford, Chipping Norton, Didcot, Fairford (Glos.), Faringdon, Thame, Wantage and Watlington.

Contributory Schemes :

Radcliffe and Associated Hospitals ; Banbury Workpeople's Hospitals Association.

Other Bodies :

The University of Oxford ; The British Medical Association (Berks., Bucks. and Oxon Branch) ; G.W.R. Medical Fund Society, Swindon ; Banbury and District Friendly Societies' Council ; Oxford District Nurses ; British Red Cross Society (Oxfordshire Branch) ; St. John Ambulance Brigade (Oxfordshire Division) ; Oxford Hospitals Aid Committee.

REPORT FOR THE TWO YEARS ENDED 31st MARCH, 1946

The deaths of three of its leading members within the short space of two years have been a severe loss to the Board.

Alderman William Hyde, who passed away in April, 1945, saw the need many years ago for a joint advisory body which could serve as a common meeting ground for representatives of local authorities and voluntary hospitals, and which should have as one of its primary objects the co-ordination of the hospital services of an area. In later years this interest of his was to lead to the creation of the Nuffield Provincial Hospitals Trust and the Berks., Bucks. and Oxon Regional Hospitals Council, but meanwhile, in 1935, largely due to Alderman Hyde's initiative, the Joint Hospitals Board was formed. He became its Honorary Secretary, an office he held until his death, and his enthusiasm and wide knowledge of hospital and health services was responsible for much of its subsequent success.

Sir E. Farquhar Buzzard, Bt., K.C.V.O., D.M., who died in December, 1945, was also one of the original members of the Board, to which he was first appointed as Regius Professor of Medicine

in the University of Oxford. On his retirement from that office he was appointed to represent the Radcliffe Infirmary, and throughout the ten years of his membership his wise counsel and guidance were of the greatest value to the Board.

Alderman C. J. V. Bellamy, M.A., whose death was announced in January, 1946, joined the Board in 1938 as a representative of the Oxford City Council, of whose Public Health Committee he was Chairman. Later he also became Chairman of the Oxford Eye Hospital, and in these two capacities he took an active part in the Board's work.

The Board deeply mourns the loss of these valued friends and colleagues.

The Board now presents the following Report, and welcomes the opportunity of expressing its thanks to the constituent local authorities and voluntary hospitals for their support and co-operation, at all times so readily given. Although the period covered by this report saw the end of the World War, it was nevertheless a period of unusual difficulty, and the Board gratefully acknowledges its indebtedness to these bodies and their officers.

The Unification of Hospital Services in Oxford

As long ago as 1939 it was realised that additional hospital accommodation was needed in Oxford, but the war broke out before anything could be done to relieve the situation, and it was not until the Churchill Hospital became available in 1945 that further steps could be taken.

The shortage of hospital beds had become so acute that it was realised some years ago that the use of the Churchill Hospital was essential if the hospital provision in the area was not to break down completely. When the hospital was evacuated by the American Forces, arrangements were immediately made by the Local Authorities in consultation with the Ministry of Health for the buildings to be used for civilian purposes. The Radcliffe Infirmary, as a temporary measure, agreed to administer the hospital on behalf of the local authorities. This arrangement reflects the co-operation and goodwill of both voluntary and statutory authorities which has always been fostered by the Board. The additional accommodation provided by the Churchill Hospital will help to meet the need for hospital beds until such time as building is again possible.

This development afforded an opportunity to consider the possibility of unifying the hospital services in the city under a single administration, and a scheme designed to give effect to this proposal was submitted by the Board to the Oxford City and County Councils, the University of Oxford, the Radcliffe Infirmary, the Wingfield-Morris Orthopaedic Hospital and the Oxford Eye Hospital. With certain reservations the scheme was approved in principle by all concerned, and a Provisional Joint Committee was appointed to draft a detailed Administrative Scheme.

Although the next stage was not reached until after the close of the two years dealt with in this report, the account would be incomplete without a reference to the present situation. The presentation to Parliament of the National Health Service Bill made it impossible for the Provisional Joint Committee to carry out the purposes for which it was appointed, but it has been decided to keep the Committee in being for the purpose of considering the hospital requirements of Oxford and those of the Teaching Hospital Centre, and the attention of the Minister of Health has been drawn to the Committee's existence in the hope that it may be of some assistance when the hospital services of the area are under consideration.

The *ad hoc* Planning Committee

This Committee was appointed by the Board to prepare plans for the post-war development of the hospital services in the area, and its first task was to make an assessment of the needs of the area in terms of hospital beds. The task was delegated to a Sub-Committee, under the Chairmanship of Professor Gask, and the Sub-Committee's findings, summarised under the several categories of sickness for which institutional accommodation has to be provided, were accepted in due course by the Planning Committee.

The Committee had barely begun work on the next stage of its task when it had the great misfortune to lose its Chairman, the late Sir Farquhar Buzzard, whose illness and subsequent death were a great blow to the Committee and brought its work to a standstill for the time being.

The activities of such a Committee not only demand of its Chairman that he should possess specialised knowledge and wide experience, but also that he should be prepared to devote a considerable amount of his time to the work. These qualifications Sir Farquhar abundantly possessed, and it has been very difficult indeed to find a successor, but the Board is now able to report, with great pleasure and satisfaction, that Professor Gask, whose qualifications for this

important work are well known throughout the region, has accepted an invitation to become Chairman of the Committee. The Planning Committee has now completed the work for which it was appointed.

In addition to the activities already mentioned, a Sub-Committee of the Planning Committee has had under consideration detailed reports from the Radcliffe Infirmary and the University of Oxford on their requirements in regard to buildings and accommodation for the purpose of carrying on both a general hospital and a medical school, and has consulted Mr. T. A. Lodge, F.R.I.B.A., whose report has received detailed consideration.

Ambulance Services

An efficient hospital service requires the support of an efficient ambulance service, available everywhere with a minimum of delay. In an endeavour to secure that the ambulances in the Oxford area should be organised to the maximum advantage of the public, the Board convened a conference of ambulance-owning authorities, both statutory and voluntary, in 1945, and put certain proposals before them. These proposals aimed at ensuring that if an ambulance, when called, was not available, the authorities responsible for that ambulance would be able to arrange with the nearest available vehicle to take the call; and that no considerations of finance or local boundaries should interfere with the inter-availability of the various services. The Board's proposals met with a gratifying response, and it is hoped to review the position during the present year.

A representative of the St. John Ambulance Brigade has been appointed to the Board.

Bureau of Health and Sickness Records

Hospitals throughout the Board's area have now been co-operating for nearly two years with the Bureau of Health and Sickness Records, which was established at Oxford by the Nuffield Provincial Hospitals Trust as an experiment in the collection, examination and tabulation of medical records on an area basis. The Committee concerned with the Bureau is at present studying the uses to which the valuable statistics now available can be put.

The Blood Transfusion Service

It will be remembered that the Board took over from the Ministry of Health in 1942 the administrative responsibility for the Emergency Blood Transfusion Service. This arrangement continued until 30th April this year, when the Service was handed over to the Ministry of Health, who will carry it on from the Regional Depot at the Churchill Hospital.

During the three and a half years of the Board's administration more than 7,500 pints of blood were supplied from the blood bank at the Radcliffe Infirmary, all of which was obtained from donors on the Emergency Panel. Very large supplies of blood were issued from the bank for use by the Services in connection with "D" Day operations, necessitating a special call on donors.

This is a splendid record, of which all concerned can be proud, and the Board takes this opportunity of expressing its thanks to the thousands of donors who so willingly responded to the calls made on them; to the staff of the Service, especially Mrs. Creed, Mrs. Foley and Mrs. Leslie; and to Mrs. Hobson and the V.A.D. nurses of the British Red Cross Society, whose regular attendance at the twice-weekly bleeding sessions has been of inestimable value.

Subscriptions from Local Authorities

The Board has continued to share in the substantial contributions paid by the major local authorities in the region under their statutory powers to the Regional Hospitals Council, the amounts received from this source and distributed to the associated voluntary hospitals being £11,819 in 1944-45 and £11,896 in 1945-46. The thanks and appreciation of the hospitals concerned are due to the local authorities for this generous form of assistance. It should be added that these are contributions towards the maintenance of the hospital services in general, and are additional to payments by the same authorities for services rendered.

Negotiations with Local Authorities

With regard to payments for services rendered, the Board conducted negotiations with various local authorities, as a result of which the Radcliffe Infirmary received larger grants towards the cost of its maternity services, the Wingfield-Morris Orthopaedic Hospital secured increased rates of payment for patients admitted at the request of the local authorities, and more suitable arrangements were made for the admission of and payment for cases of notifiable infectious disease.

Oxford Eye Hospital

Moved by the obvious need to replace the present Eye Hospital by a building which would not only be more worthy of the hospital's future as the Ophthalmic Centre for the region, but would also be better fitted to give an adequate service to the public, the Board in 1944 approved the launching of an appeal for £100,000, and appointed representatives to a Joint Appeals Committee.

The need for improved facilities and additional accommodation was, however, too urgent to wait until a new hospital could be built, and approval was given to an interim development scheme, towards the cost of which grants totalling £2,500 were secured from the Regional Hospitals Council and the Nuffield Provincial Hospitals Trust.

Ophthalmic Services in the Area

The report on the ophthalmic services presented to the Regional Hospitals Council in 1943 by the Medical Advisory Committee recommended the organisation of a regional ophthalmic service with the Oxford Eye Hospital as the Regional Ophthalmic Centre. It proved impossible to implement the report at the time, but a start was made by encouraging the establishment at the Horton General Hospital, Banbury, of an Ophthalmic Clinic in association with and staffed by the Eye Hospital, where all the eye work in the Banbury area, including the School Clinics, is carried out. A grant of £150 towards the cost of equipping the clinic was made by the Regional Council.

Didcot Hospital

The Board has continued its active interest in the administration of this hospital, the Honorary officers of the Board having been appointed members of the Hospital's Committee of Management under the terms of the Trust Deed.

Freeland House

A welcome addition to the hospital facilities of the area was the opening of Freeland House by the British Red Cross Society as a Recovery Home for hospital patients, through the kind interest of its owners, Mr. and the Hon. Mrs. Michael Mason. Freeland House has accommodation for approximately sixty patients, and is already doing most useful work. Mrs. Foxley Norris, County Director of the British Red Cross Society, has accepted an invitation to become a member of the Board.

Finance

Although the total amount of voluntary income collected by the Board in 1945-46 on behalf of its associated hospitals showed a reduction under most headings, it was nevertheless higher than in any previous year except 1944-45, which was a record. The respective totals were £11,928 in 1945-46 and £13,196 in 1944-45, comparing with less than £6,000 in 1942-43. Most of this remarkable increase came from three sources. The Oxford Hospitals Aid Committee, formed in 1943 under the Chairmanship of Mr. A. W. H. B. King, with Mr. T. M. Webber as its present organiser, has been very successful in its money-raising activities, and now produces more than £3,000 each year from the organisation of special efforts in the city. Alexandra Rose Day, too, has helped to swell the total, though it reached peak figures in 1943 and 1944 from which it has since declined. The third source of additional income was the amount allocated to the Board from the opening of cinemas on Sundays; the large increase in the amount received from this source was largely due to the efforts of the late Alderman Bellamy.

The grateful thanks and appreciation of the Board and its associated hospitals are expressed to all who have assisted in any way to make this side of the Board's work so successful.

Conclusion

The Board concludes its report by acknowledging once again the debt it owes to its President, Viscount Nuffield, whose many benefactions have had so great an influence on the development of hospital policy in this area. The coming into existence of the Joint Hospitals Board, followed some years later by the Nuffield Provincial Hospitals Trust and the Berks., Bucks. and Oxon Regional Hospitals Council, with which the Board is associated, have created machinery for consultation of which full advantage has been taken, in the interests of the hospital service and the community. The policy of consultation has, indeed, been so well developed and encouraged in this area that it should help to facilitate the smooth working of the new administrative machinery when the National Service Bill becomes law.

THE READING AND DISTRICT JOINT HOSPITALS COUNCIL

Chairman :

Mr. W. E. C. McIlroy, C.B.E., J.P., (Reading Borough Council).

Vice-Chairman :

Colonel C. B. Krabbé (Royal Berkshire Hospital, Reading).

Hon. Treasurer :

Brigadier John Holliday (Newbury District Hospital).

Secretary :

Mr. George Watts, F.H.A., 16 King Edward Street, Oxford. (Tel. 2712.)

The following local authorities, voluntary hospitals and other bodies are represented on the Council :—

Local Authorities :

County Councils : Berkshire ; Hampshire.

County Borough Councils : Reading.

Municipal Borough Councils : Newbury.

Voluntary Hospitals (including Medical Staffs) :

Royal Berkshire Hospital, Reading ; Newbury District Hospital ; Cold Ash Children's Hospital, Newbury ; and the Cottage Hospitals at Frimley and Camberley, Henley, Odiham, Wallingford, and Yateley.

Contributory Schemes :

Royal Berkshire and Associated Hospitals ; Reading and District Workpeople's Hospital Fund.

Other Bodies :

The University of Oxford (Faculty of Medicine) ; The University of Reading ; British Medical Association (Berks., Bucks. and Oxon Branch).

REPORT FOR THE PERIOD ENDED 31st MARCH, 1946

Introduction

Soon after the formation in April, 1940, of the Berks., Bucks. and Oxon Regional Hospitals Council, representatives of the various statutory and voluntary bodies concerned with the provision of hospital services in the Reading area held a meeting at the Royal Berkshire Hospital. The outcome of this meeting was a unanimous decision to form a Joint Hospitals Council, to work in association with the Regional Hospitals Council and the Nuffield Provincial Hospitals Trust in furthering co-operation between the various types of hospital authority.

All the authorities concerned, both statutory and voluntary, having agreed to join the Council, the initial meeting was held in November, 1940. Regular meetings have been held at quarterly intervals since that date, and the Council now presents the following report of its activities.

It is with feelings of deep regret that the Council has to record the death of its first Chairman, Mr. A. T. Loyd, O.B.E. Although Mr. Loyd had already resigned from that office, owing to his many other commitments, he continued to take an active interest in its work, and his loss was severely felt. The Council also records with sorrow the death of its first Honorary Treasurer, Alderman A. W. Tudor, and that of Mrs. J. Holliday, who succeeded him in that office.

Planning of Hospital Services

Undoubtedly the most important piece of work undertaken by the Council during the period under review was the preparation of a report on the planning of hospital services in the Division.

The task was embarked upon at the suggestion of the Regional Hospitals Council, and was delegated to a specially appointed Planning Committee under the Chairmanship of Mr. F. H. Aitken Walker, F.R.C.S. The detailed work of investigating existing facilities and of assessing probable future needs was referred to a small sub-committee, of which also Mr. Aitken Walker was Chairman. In this work, which necessitated a great many meetings, the sub-committee was considerably helped by having access to the information on which the survey of the Berks., Bucks. and Oxon region was based, and to useful memoranda prepared by Professor Gask.

The sub-committee's interim report was adopted by the Planning Committee and presented to the Council in June, 1945. It consisted largely of a statement of existing resources and an assessment of needs in general terms, and was intended to be a basis for the formulation of more detailed proposals. At the Council's request the Planning Committee resumed its meetings, and eventually produced the final report which has since been adopted and forwarded to the Regional Council for co-ordination with the plans of the remaining divisions of the region.

Throughout the whole time the Committee was sitting, proposals for a National Health Service were under consideration, first by the Coalition Government and later by the present Government. In the nature of things, therefore, the proposals had to be of such a kind as would fit into the framework of a national scheme, and considerations of administrative responsibility have not been dealt with in the report.

The Council takes this opportunity of congratulating Mr. Aitken Walker and all who helped to produce the report on a most useful contribution to existing knowledge of the hospital requirements of the area, and one which it is earnestly hoped will assist those who are called upon to implement the Government's plans for a National Health Service.

Ambulance Services

An efficient ambulance service is an indispensable adjunct of an efficient hospital service. To be thoroughly efficient, however, it must be available to every member of the community, with a minimum of delay and inconvenience, and considerations of local boundaries must not be allowed to interfere with the availability of an ambulance.

While the efficiency of the individual units comprising the existing services cannot be denied, it is also true to say that the multiplicity of these units, and the number of separate ambulance-owning authorities, has been a factor in limiting their usefulness.

The matter was first brought to the notice of the Council when difficulties at Newbury, due to the calling-up of drivers, restricted the operation of the local ambulance service to the borough itself. Fortunately the American Ambulance Service then stationed at Reading came to the rescue and accepted responsibility for the removal of all long-distance cases in that area, but the Council's investigation of this local problem revealed the need for the appointment of a Committee which could look at the ambulance question as a whole and make proposals for co-ordinating the services in this Division.

Thus there came into being the Ambulance Services Advisory Committee, which, under the Chairmanship of Col. J. Norman Walker, gave much time and consideration to this matter. The result of this Committee's recommendations was a decision to establish an Ambulance Bureau at the Royal Berkshire Hospital which, by dealing with all calls for ambulances from the surrounding area, could make better use of the existing ambulances, and from its experience, suggest where new or additional ambulances were needed.

The Bureau has now been functioning for more than a year, and has done much useful work. One of its particular advantages is that a doctor needing an ambulance for an urgent case no longer needs to telephone a series of different numbers until he finds an ambulance available, but merely telephones the Bureau, upon which falls the onus of fulfilling his requirements.

It is necessary to state that although in the Council's view this is the most suitable scheme that could be put forward at the present time, it does not regard the position as wholly satisfactory, and hopes that when opportunity permits a more comprehensive scheme can be formulated for the whole region.

Local Authority Grants

A gratifying feature of the co-operation that exists between local authorities and voluntary hospitals in the Berks., Bucks. and Oxon region is the use made by the major local authorities of

their powers under the Public Health Act 1936 to subscribe towards the maintenance of voluntary hospitals in their areas. In this region, since 1940, the subscriptions have been paid to the Regional Hospitals Council on a regional basis, and have amounted to upwards of £30,000 annually—of which the Reading Division's share has averaged more than £9,000. This has been distributed to the associated voluntary hospitals through the agency of the Joint Hospitals Council.

These generous contributions, which are warmly appreciated by the benefiting hospitals, are in aid of the general services, and are additional to the large amounts paid by the same authorities for services rendered under contract to their statutory patients.

General

In addition to the activities enumerated above the Council has dealt with many other matters which have been referred to it from time to time by its constituent authorities and hospitals, and also by the Regional Hospitals Council. It assisted with the original survey of the hospital services carried out by the Regional Council in 1940; it considered and reported on such widely diverse matters as the need for a service of mass-radiography, the reference of hospital out-patients to District Nurses, and the circulation of appeals in the Reading area by London Hospitals without previous approach to local hospitals, and it has acted as the medium through which grants from the Nuffield Provincial Hospitals Trust have been paid.

In these and other ways, and most of all by enabling the representatives of local authorities and voluntary hospitals to meet together and discuss common problems, it has helped to promote mutual understanding and to further the purposes for which the Nuffield Trust and its associated Regional and Divisional Hospitals Councils were established.

Conclusion

The period covered by this report was one of unusual difficulty. Partly because of the war, but partly also because of the uncertainty which prevailed for so long as to the future of the hospital services, little constructive planning or development could be attempted.

Nevertheless the Council feels that much useful work has been accomplished, and valuable experience gained, and the Council therefore concludes its report by expressing its thanks to all who have contributed in any way to the activities of the past few years.

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